

| | | | | |
|-----------------------------|-------------------------|--------------|-----------------------|----------------------------------|
| SERIAL NUMBER 09/288,344 | FILING DATE 04/08/99 | CLASS 435 | GROUP ART UN. 1632 | ATTORNEY DOCKET NO. P-PM-3474 |
|-----------------------------|-------------------------|--------------|-----------------------|----------------------------------|

APPLICANT ERNEST G. SEIDMAN, COTE ST. LUC, CANADA; YVES THEORET, MONTREAL, CANADA.

CONTINUING DOMESTIC DATA***
VERIFIED PROVISIONAL APPLICATION NO. 60/101,714 09/24/98

371 (NAT'L STAGE) DATA***
VERIFIED

Interference File

****FOREIGN APPLICATIONS*****
VERIFIED**

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/20/99 ** SMALL ENTITY **

| | | | | | | |
|---|---|---|-------------------------|---|--------------------|-------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY CAX | Sheets Drawing 3 | Total Claims 34 | Independent Claims 4 |
| Verified and Acknowledged Examiner's Initials _____ Initials _____ | | | | | | |
| ADDRESS | CAMPBELL & FLORES LLP SUITE 700 4370 LA JOLLA VILLAGE DRIVE SAN DIEGO CA 92122 | | | | | |
| TITLE | METHODS OF OPTIMIZING DRUG THERAPEUTIC EFFICACY FOR TREATMENT OF IMMUNE-MEDIATED GASTROINTESTINAL DISORDERS | | | | | |
| FILING FEE RECEIVED \$610 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____ | | |



UNITED STATES PATENT AND TRADEMARK OFFICE

**COMMISSIONER FOR
UNITED STATES PATENT AND TRADEMARKS
WASHINGTON, D. C.**



Bib Data Sheet

CONFIRMATION NO.

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|
| SERIAL NUMBER 09/288,344 | FILING DATE 04/08/1999 RULE | CLASS 514 | GROUP ART UNIT 1623 | ATTORNEY DOCT NO. P-PM-3474 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------|

APPlicants

ERNEST G. SEIDMAN, COTE ST. LUC, CANADA:

YVES THEORET, MONTREAL, CANADA:

CONTINUING DATA *****

THIS APPLN CLAIMS BENEFIT OF 60/101,714 09/24/1998

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
** 05/20/1999

** SMALL ENTITY **

| | | | | |
|--|-------------------------------|------------------------|-----------------------|---------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no | STATE OR COUNTRY CANADA | SHEETS DRAWING 3 | TOTAL CLAIMS 34 | INDEPENDENT CLAIM 4 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged Examiner's Signature _____ Initials _____ | | | | |

ADDRESS

23601

CAMPBELL & FLORES LLP

4370 LA JOLLA VILLAGE DRIVE

7TH FLOOR

SAN DIEGO - CA

92122

TITLE

METHOD OF TREATING IBD/CROHN'S DISEASE AND RELATED CONDITIONS WHEREIN DRUG METABOLITE LEVELS IN HOST BLOOD CELLS DETERMINE SUBSEQUENT DOSAGE

| | | |
|--|--|--|
| FILING FEE RECEIVED 1329 | <p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p> | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|--|--|--|

| SERIAL NUMBER | FILING DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|-------------|-------|----------------|---------------------|
| 09/288,344 | 04/08/99 | 435 | 1632 | P-PM-3474 |

APPLICANT ERNEST G. SEIDMAN, COTE ST. LUC, CANADA; YVES THEORET, MONTREAL, CANADA.

****CONTINUING DOMESTIC DATA*******

VERIFIED PROVISIONAL APPLICATION NO. 60/101,714 09/24/98

371 (NAT'L STAGE) DATA***

VERIFIED

Interference File

| Class | Subclass |
|-------|----------|
| 514 | 262 |
| | 391 |
| | 395 |
| | |
| | |
| | |
| 9922 | 8/2/99 |

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/20/99 ** SMALL ENTITY **

Foreign Priority claimed yes no
 35 USC 119 (a-d) conditions met yes no Met after Allowance
 STATE OR COUNTRY
 SHEETS DRAWING
 TOTAL CLAIMS
 INDEPENDENT CLAIMS
 Verified and Acknowledged
 CAX 3 34 4

| | | | | |
|---------|--|----------|--|--|
| | Examiner's Initials | Initials | | |
| ADDRESS | <p>CAMPBELL & FLORES LLP SUITE 700 4370 LA JOLLA VILLAGE DRIVE SAN DIEGO CA 92122</p> | | | |

**METHODS OF OPTIMIZING DRUG THERAPEUTIC EFFICACY FOR TREATMENT OF
IMMUNE-MEDIATED GASTROINTESTINAL DISORDERS**

| | | |
|------------------------|---|---|
| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
| \$610 | | |